











## APPLICATION FOR STANDARD COLLECTOR PLATES

Collector versions of each standard license plate listed below can be purchased for a one-time fee of \$10 each. **These plates are for display purposes only - not for vehicle registration.** Complete this form, including your name and address, to purchase by mail or fax.

 <p>_____ Amateur Radio Operator (ARO) Blue Bar</p>	 <p>_____ Great Lakes Splendor Motorcycle</p>
 <p>_____ Amateur Radio Operator (ARO) Great Lakes Splendor</p>	 <p>_____ Historical</p>
 <p>_____ Black and White Plate (1979)</p>	 <p>_____ Honorary Consul</p>
 <p>_____ Blue and White Plate (1984 to Current)</p>	 <p>_____ North American International Auto Show (Limited quantities. Available in Graphic only. Specify by Year.)</p>
 <p>_____ Great Lakes Splendor</p>	 <p>_____ Olympic Education</p>
<p>Total # of plates = _____</p> <p style="margin-left: 350px;">x \$10</p> <p>Total Fees = _____</p>	

**To Purchase by MAIL:** Complete the order form. If paying by check or money order, make payable to **State of Michigan**. If paying by credit card, complete the credit card section below. Mail this completed application to : **Michigan Department of State, Distributed Services Unit, Lansing, MI 48918.**

**To Purchase by FAX:** If purchasing by fax, you must pay by credit card. Fax this completed application to **(517) 322-1063 - 24 hours a day, 7 days a week.**

## Mailing Information (required)

NAME: _____			
ADDRESS: _____		CITY: _____	
		STATE: _____	
ZIP: _____			
DAYTIME TELEPHONE NUMBER: (_____) _____ - _____			

## Credit Card Information (if paying by credit card)

My payment is by:			
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Discover	<input type="checkbox"/> Check (enclosed)
<input type="checkbox"/> Money Order (enclosed)			
Credit Card Number:		Expiration Date:	
<div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>	<div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>	<div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>	<div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>
		Total Fees:	
		\$ <div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; width: 40px; height: 20px; text-align: center; font-size: 1.2em;">.00</div> </div>	
My signature below authorizes the Michigan Department of State to charge my account.			
Please SIGN your name: <b>X</b> _____			
Please PRINT your name: _____			